



# OFFICE OF RETIREMENT SERVICES

Serving the Customers of the Judges, Public School Employees,

State Employees, and State Police Retirement Systems

PO Box 30171, Lansing, MI 48909-7671 <http://www.michigan.gov/ors>

Telephone: 517-322-5103 Outside Lansing: 800-381-5111

## APPLICATION FOR WEEKLY WORKER'S COMPENSATION CREDIT

As a Office of Retirement Services (ORS) member, you may receive retirement credit for time you received Weekly Worker's Compensation (WWC) that was not previously reported to the Retirement System.

If you received WWC or a litigated WWC settlement for a period before **July 1, 1992**, you must complete this application to claim credit.

If you received WWC for a period **after July 1, 1992**, your WWC payments and hours you would otherwise have worked should have been reported to ORS by your employing educational agency. Contact your payroll office to verify your post-July 1, 1992 WWC payments were reported to the Retirement System. If not, your employing educational agency should submit a correction to the report. Your cost is computed based on your retirement plan contribution schedule in effect at the time, plus interest.

If you received a litigated WWC settlement for a period after July 1, 1992, you should submit complete documentation to the Retirement System for review.

### Eligibility Requirements

As a ORS member, you can apply for WWC credit at any time before retirement. **You may use this credit to satisfy the minimum service requirement for a monthly pension.** If you leave Michigan public school employment before you are eligible to begin receiving a pension, ORS will refund your payment, if any, upon request. ORS does not limit the amount of WWC credit you may receive.

An employee/employer relationship with an ORS educational agency must have been in effect at the start of WWC and during the period of WWC. **If you are retiring or terminating employment, you must apply and make payment, if required, before termination.**

### Application Due Date

Date of application may affect cost. You should apply early to allow ORS adequate processing time. To

avoid additional interest charges assessed each January 1 and July 1, ORS should receive your application by **November 1 and May 1** to allow you to make payment during the current interest period. Receipt of a billing will not obligate you to purchase the credit.

### Cost

Your cost is computed based on the amount of WWC you received and the ORS contribution schedule in effect at the time, plus interest. The schedule for pre-July 1, 1992 WWC periods is as follows:

**Contributory Plan - WWC you received before July 1, 1977:** Your cost will be based on the actual WWC payments you received and the retirement contribution schedule in effect for those years, plus interest.

**Noncontributory Plan - WWC you received between July 1, 1977 and December 31, 1986:** Retirement credit is granted at no cost.

**Basic Plan - WWC you received between January 1, 1987 and June 30, 1992:** Retirement credit is granted at no cost.

**Member Investment Plan - WWC you received between January 1, 1987 and June 30, 1992:** If you are a Member Investment Plan (MIP) participant, your cost is computed based on WWC payments you received and the MIP contribution schedule in effect for those years, plus interest.

If the credit you are requesting requires a member payment, ORS will bill you. Retirement credit will be granted upon payment in full. You may make partial payments of \$800.00 or more. Compound interest will continue to accrue semi-annually on the unpaid balance.

## Application Instructions

**Step 1:** Complete Part 1 and attach a photocopy of your Weekly Worker's Compensation payment records (i.e., MDL 101, 102, 701 and/or various documents from litigation). **These records must indicate your date(s) of injury, payment beginning and ending dates and the amount paid weekly (check stubs are not acceptable).** The records should span the entire period of WWC.

If a Redemption Order or other litigated decision occurred, a photocopy of this record is also required.

If you do not have payment record copies available, you may obtain these records (i.e., MDL 101, 102, 701 and/or various documents from litigation) by contacting the educational agency payroll/personnel office where the injury occurred, or write to:

**Michigan Department of Labor  
Bureau of Worker's Compensation  
Claims Processing Division  
P.O. Box 30016  
Lansing, Michigan 48909**

Requests for complete records should include your full name, previous married/maiden names, Social Security number, employing educational agency at the time of injury, date(s) of injury and whether the claim has ever been litigated.

**Step 2:** Forward the application and payment records to the educational agency where the injury occurred for completion of Part 2.

**Step 3:** After completing Part 2, the educational agency must submit the completed application and attachments to ORS at the address on Page 3.

ORS will notify you when your completed application has been reviewed. If your application or WWC records are incomplete, processing will not continue until appropriate documentation is received.

If you have questions after reading the application thoroughly, contact ORS in writing or call (800) 381-5111 for assistance.



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For Office Use Only

## APPLICATION FOR WEEKLY WORKER'S COMPENSATION CREDIT

### PART 1: To be completed by applicant. Attach a photocopy of Weekly Worker's Compensation payment records

NAME (Last, First, M.I.)	SOCIAL SECURITY NUMBER*
ADDRESS	ANTICIPATED RETIREMENT DATE (If Known)
CITY, STATE, ZIP	TELEPHONE (     )
EMPLOYING EDUCATIONAL AGENCY AT THE TIME OF INJURY	
Did you receive Weekly Worker's Compensation payments? <input type="checkbox"/> No. <input type="checkbox"/> Yes. Attach photocopy of records detailed on Page 2. Was a Redemption Order, Voluntary Payment Agreement, Opinion/Order or other litigated decision filed as a result of the injury? <input type="checkbox"/> No. <input type="checkbox"/> Yes. Attach photocopy of records detailed on Page 2.	
I certify I received Weekly Worker's Compensation payments and have attached the records identified on Page 2.	
Signature _____	Date _____

### PART 2: To be completed by Payroll/Personnel at the educational agency where the injury occurred. Return application and attachments to ORS.

1. Were Weekly Worker's Compensation payments received after July 1, 1992 reported to ORS? <input type="checkbox"/> No. <input type="checkbox"/> Yes, as indicated below on a school fiscal year basis (July 1 through June 30). <div style="display: flex; justify-content: space-between;"> <div>From: _____</div> <div>To: _____</div> <div>Amount: \$ _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>From: _____</div> <div>To: _____</div> <div>Amount: \$ _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>From: _____</div> <div>To: _____</div> <div>Amount: \$ _____</div> </div>		
2. Was there an employee/employer relationship in effect during the entire time period as indicated on the attached documents that Weekly Worker's Compensation was received? <input type="checkbox"/> No, relationship terminated on: _____ <input type="checkbox"/> Yes.		
3. Did the applicant's injury or mental or physical illness as indicated on the Weekly Worker's Compensation documentation result from employment while serving as an employee of this educational agency? <input type="checkbox"/> No. <input type="checkbox"/> Yes.		
<b>I certify that the above statements are true to the best of my knowledge and belief.</b>		
SIGNATURE OF PERSON COMPLETING PART 2	TITLE	
EMPLOYING EDUCATIONAL AGENCY	TELEPHONE NUMBER (     )	
ADDRESS	FAX NUMBER (If Available) (     )	
CITY, STATE, ZIP	DATE	

Any person who, with intent to deceive, makes a false statement of record required under this Retirement System; or who, with intent to deceive, violates this act or a rule promulgated under this act is guilty of a misdemeanor punishable by imprisonment for not more than 90 days or a fine of not more than \$500.00, or both. (P.A. 300 of 1980, Section 105, as amended.)